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|--|---------------|--|------------|---|---------|-------------|--|
| No. C 139970 | | Due no later than Jul 31, 2009 | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | Annual Report Form | | GARY D SLETTE 134 3RD AVE E TWIN FALLS ID 83301 | | | |
| | | 1. Mailing Address: Correct in this box if needed. GARY D. SLETTE, P.A. PO BOX 1906 TWIN FALLS ID 83303 | | 3. <u>New</u> Registered Agent Signature: * | | | |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional). | | | | | | | |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code | |
| PRESIDENT | GARY D SLETTE | P O BOX 1906 | TWIN FALLS | ID | USA | 83303-1906 | |
| SECRETARY | ROBIN L MOORE | P O BOX 1906 | TWIN FALLS | ID | USA | 83303-1906 | |
| 5. Organized Under the Laws of: ID C 139970 | | 6. Annual Report must be signed.* Signature: Gary D Slette Name (type or print): Gary D Slette Date: 06/09/2009 Title: President | | | | | |
| Processed 06/09/2009 | | * Electronically provided signatures are accepted as original signatures. | | | | | |